

Operation and Maintenance Service Contract for Pressure Distribution Soil Absorption System

This form is a suggested format. You and your service provider may choose a different type of form.

Date: _____

Customer: _____ Service Co.: _____

Mailing Address: _____ Service Address: _____

Site: _____ Service Phone: _____

This Company agrees to provide service and maintenance for the Pressure Distribution Disposal Field at the above referenced address. The following maintenance and service schedule is proposed for the next (2) two years of operation commencing upon the date of Certificate of Compliance, receipt of the signed contract and the annual cost in full.

Scheduled Annual Service

Cost: 4 visits per year at \$_____ per visit = \$_____

(Note: all covers and access ports must be to grade to allow for maintenance.)

1. Check sludge and scum depth and clean the effluent filter in the 1500-gallon septic tank.
2. Check panel and alarm system.
3. Check ejector pump and float switches in the Pump Chamber.
4. Check distal pressure and compare with design plan.
5. Clean and flush laterals as necessary.
6. Notify client verbally of any problems encountered.
7. Notify North Andover Board of Health and owner within 24 hours of a system failure or alarm event with corrective action taken.

Unscheduled Service

Unscheduled emergency service calls will be billed at the following hourly rate:

- Monday through Friday from 7 a.m. – 5 p.m. = \$_____ per hour
- Monday through Friday from 5 p.m. – 7 a.m. = \$_____ per hour
- Saturday and Sunday with a minimum 2 hr charge = \$_____

In accordance with the Title V Regulations, quarterly inspection reports will be submitted to the local Board of Health.

Acceptance by Owner:

Acceptance by Inspector:

Signature

Signature